

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

ADDRESS (number and street)

4500 WITMER INDUSTRIAL ESTATES

Check if different
than previously
reported. (ACC)

NIAGARA FALLS

NY

14305

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00155069

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

PALLADINO, RICHARD, , ,

Type or Print Name of Treasurer

Signature of Treasurer

PALLADINO, RICHARD, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 07 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		192901.25
(b) Cash on Hand at Beginning of Reporting Period.....	195522.97	
(c) Total Receipts (from Line 19)	17634.45	35647.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	213157.42	228548.26
7. Total Disbursements (from Line 31).....	48267.80	63658.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	164889.62	164889.62
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1158.91

1219.36

(ii) Unitemized

9270.72

21250.26

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

10429.63

22469.62

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

10429.63

22469.62

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

7204.82

13177.39

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

17634.45

35647.01

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

17634.45

35647.01

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	48267.80	63658.64
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	48267.80	63658.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48267.80	63658.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10429.63	22469.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10429.63	22469.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BACHMAN, NICHOLAS, A, ,

Mailing Address 3110 HARTLAND RD

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.34457

Amount of Each Receipt this Period

24.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BACHMAN, NICHOLAS, A, ,

Mailing Address 3110 HARTLAND RD

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : SA11AI.34458

Amount of Each Receipt this Period

23.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BACHMAN, NICHOLAS, A, ,

Mailing Address 3110 HARTLAND RD

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

258.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.34459

Amount of Each Receipt this Period

13.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BRIERLEY, MICHAEL, P, ,</p> <p>Mailing Address 132 - 68TH ST.</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2016</p> <p>Transaction ID : SA11AI.34405</p>	
<p>City NIAGARA FALLS</p> <p>State NY</p> <p>Zip Code 14304</p>	<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 29.51</p>	
<p>Name of Employer (for Individual) INTERNATIONAL CHIMNEY CORP</p> <p>Occupation (for Individual) LABORER</p>		<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Aggregate Year-to-Date ▼ 206.39</p>		<p><input type="checkbox"/> Memo Item</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CAMPBELL, MICHAEL, , ,</p> <p>Mailing Address 1960 HARTLAND RD</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2016</p> <p>Transaction ID : SA11AI.34385</p>	
<p>City APPLETON</p> <p>State NY</p> <p>Zip Code 14008</p>	<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 44.70</p>	
<p>Name of Employer (for Individual) BABCOCK UTILITIES, INC.</p> <p>Occupation (for Individual) LABORER</p>		<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Aggregate Year-to-Date ▼ 225.08</p>		<p><input type="checkbox"/> Memo Item</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CERRONE, VINCENT, J, ,</p> <p>Mailing Address 945 LOWER RIVER RD</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 16 / 2016</p> <p>Transaction ID : SA11AI.34365</p>	
<p>City YOUNGSTOWN</p> <p>State NY</p> <p>Zip Code 14174</p>	<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 24.00</p>	
<p>Name of Employer (for Individual) CERRONE MARK V INC</p> <p>Occupation (for Individual) LABORER</p>		<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		
<p>Aggregate Year-to-Date ▼ 210.00</p>		<p><input type="checkbox"/> Memo Item</p>		
<p>SUBTOTAL of Receipts This Page (optional).....▶</p>			<p>98.21</p>	
<p>TOTAL This Period (last page this line number only).....▶</p>				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CERRONE, VINCENT, J, ,

Mailing Address 945 LOWER RIVER RD

City
YOUNGSTOWNState
NYZip Code
14174FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CERRONE MARK V INCOccupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	19	2016

Transaction ID : SA11AI.34366

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COSTA, JOSEPH, , N,

Mailing Address 8226 WITKOP AVE

City
NIAGARA FALLSState
NYZip Code
14304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QUALITY INNOccupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.97

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	01	2016

Transaction ID : SA11AI.34321

Amount of Each Receipt this Period

57.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COSTA, JOSEPH, , N,

Mailing Address 8226 WITKOP AVE

City
NIAGARA FALLSState
NYZip Code
14304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QUALITY INNOccupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.83

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	30	2016

Transaction ID : SA11AI.34322

Amount of Each Receipt this Period

0.86

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

88.44

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COSTA, JOSEPH, , N,

Mailing Address 8226 WITKOP AVE

City
NIAGARA FALLS

State
NY

Zip Code
14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QUALITY INN

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.03

Date of Receipt

MM / DD / YYYY
08 / 30 / 2016

Transaction ID : SA11AI.34323

Amount of Each Receipt this Period

1.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUMOND, THOMAS, W, ,

Mailing Address 7027 KINNE ROAD

City
LOCKPORT

State
NY

Zip Code
14094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
YARUSSI CONSTRUCTION INC

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.60

Date of Receipt

MM / DD / YYYY
09 / 19 / 2016

Transaction ID : SA11AI.34279

Amount of Each Receipt this Period

14.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRACE, WILLIAM, M, ,

Mailing Address 1323 - 104TH ST

City
NIAGARA FALLS

State
NY

Zip Code
14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.L.#91 WELFARE FUND

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
08 / 08 / 2016

Transaction ID : SA11AI.34218

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

39.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRACE, WILLIAM, M, ,

Mailing Address 1323 - 104TH ST

City

NIAGARA FALLS

State

NY

Zip Code

14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.L.#91 WELFARE FUND

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 08 / 2016

Transaction ID : SA11AI.34219

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIGAN, PATRICK, , J,

Mailing Address 1353 - 104TH ST

City

NIAGARA FALLS

State

NY

Zip Code

14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

QUALITY INN

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.94

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.34188

Amount of Each Receipt this Period

14.10

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIGAN, PATRICK, , J,

Mailing Address 1353 - 104TH ST

City

NIAGARA FALLS

State

NY

Zip Code

14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

QUALITY INN

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

221.13

Date of Receipt

09 / 19 / 2016

Transaction ID : SA11AI.34189

Amount of Each Receipt this Period

12.19

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.29

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIGAN, PATRICK, , J,

Mailing Address 1353 - 104TH ST

City

NIAGARA FALLS

State

NY

Zip Code

14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

QUALITY INN

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

233.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.34190

Amount of Each Receipt this Period

12.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEWITT II, LYLE, S, ,

Mailing Address 4928 CREEK RD

City

LEWISTON

State

NY

Zip Code

14092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CERRONE MARK V INC

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.34146

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEWITT II, LYLE, S, ,

Mailing Address 4928 CREEK RD

City

LEWISTON

State

NY

Zip Code

14092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CERRONE MARK V INC

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

233.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.34147

Amount of Each Receipt this Period

32.10

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

68.48

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOYT, PAUL, A, ,

Mailing Address 1397 CARAVELLE DR

City

NIAGARA FALLS

State

NY

Zip Code

14304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CERRONE MARK V INC

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.45

Date of Receipt

09 / 19 / 2016

Transaction ID : SA11AI.34140

Amount of Each Receipt this Period

26.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JARVIS, SCOTT, , ,

Mailing Address 2243 PIERCE AVE

City

NIAGARA FALLS

State

NY

Zip Code

14301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

YARUSSI CONSTRUCTION INC

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.36

Date of Receipt

09 / 19 / 2016

Transaction ID : SA11AI.34133

Amount of Each Receipt this Period

28.95

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KAJFASZ JR, STANLEY, E, ,

Mailing Address 2260 FALLS STREET

City

NIAGARA FALLS

State

NY

Zip Code

14303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MILITELLO, E.J. CONCRETE, INC.

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

237.16

Date of Receipt

09 / 22 / 2016

Transaction ID : SA11AI.34108

Amount of Each Receipt this Period

37.80

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAROTTA, JOE, , ,

Mailing Address 6350 VINTAGE COURT

City
LOCKPORT

State
NY

Zip Code
14094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SCRUFARI CONSTRUCTION CO INC

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : SA11AI.34041

Amount of Each Receipt this Period

31.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MC CABE, MICHAEL, P, ,

Mailing Address 4371 MACK AVENUE

City
GASPORT

State
NY

Zip Code
14067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.34026

Amount of Each Receipt this Period

24.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MC CABE, MICHAEL, P, ,

Mailing Address 4371 MACK AVENUE

City
GASPORT

State
NY

Zip Code
14067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

244.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : SA11AI.34027

Amount of Each Receipt this Period

22.72

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MC CABE, MICHAEL, P, ,

Mailing Address 4371 MACK AVENUE

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.34028

Amount of Each Receipt this Period

26.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MC CABE, MICHAEL, P, ,

Mailing Address 4371 MACK AVENUE

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.34029

Amount of Each Receipt this Period

31.16

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTANTE, PETER, JR., , M,

Mailing Address 994 JAMES DRIVE

City
LEWISTONState
NYZip Code
14092FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GROSS, DAVID CONTRACTING CORP.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.39

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : SA11AI.33989

Amount of Each Receipt this Period

25.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

83.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MORRIS, NATHAN, , R,</p> <p>Mailing Address 4779 TONAWANDA CREEK RD</p> <p>City NORTH TONAWANDA State NY Zip Code 14120</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) MORRIS MASONRY RESTOR LLC Occupation (for Individual) LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 203.70</p>			<p>Date of Receipt 08 / 22 / 2016 Transaction ID : SA11AI.33981 </p> <p>Amount of Each Receipt this Period 18.00 </p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MORRIS, NATHAN, , R,</p> <p>Mailing Address 4779 TONAWANDA CREEK RD</p> <p>City NORTH TONAWANDA State NY Zip Code 14120</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) MORRIS MASONRY RESTOR LLC Occupation (for Individual) LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 225.30</p>			<p>Date of Receipt 09 / 19 / 2016 Transaction ID : SA11AI.33982 </p> <p>Amount of Each Receipt this Period 21.60 </p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ORSI, MICHAEL, P, ,</p> <p>Mailing Address 69 MASON DR</p> <p>City NIAGARA FALLS State NY Zip Code 14304</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) CERRONE MARK V INC Occupation (for Individual) LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </p> <p>Aggregate Year-to-Date ▼ 203.84</p>			<p>Date of Receipt 09 / 19 / 2016 Transaction ID : SA11AI.33956 </p> <p>Amount of Each Receipt this Period 19.20 </p> <p><input type="checkbox"/> Memo Item</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>58.80</p>	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALLADINO, RANDY, , ,

Mailing Address 7657 HIGHLAND DRIVE

City
GASPORT

State
NY

Zip Code
14067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.L.#91 EDUCATIONAL & TRAIN.FUND

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.33949

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PALLADINO, RANDY, , ,

Mailing Address 7657 HIGHLAND DRIVE

City
GASPORT

State
NY

Zip Code
14067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.L.#91 EDUCATIONAL & TRAIN.FUND

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 09 / 2016

Transaction ID : SA11AI.33950

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALLADINO, RICHARD, , ,

Mailing Address 7657 HIGHLAND DR

City
GASPORT

State
NY

Zip Code
14067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.L.#91 EDUCATIONAL & TRAIN.FUND

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 03 / 2016

Transaction ID : SA11AI.33952

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALLADINO, RICHARD, , ,

Mailing Address 7657 HIGHLAND DR

City
GASPORTState
NYZip Code
14067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L.L.#91 EDUCATIONAL & TRAIN.FUND

Occupation (for Individual)

LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2016

Transaction ID : SA11AI.33953

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRITCHARD, JOHN, , ,

Mailing Address 8696 ROUTE 353

City
CATTARAUGUSState
NYZip Code
14719FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.68

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2016

Transaction ID : SA11AI.33899

Amount of Each Receipt this Period

52.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRITCHARD, JOHN, , ,

Mailing Address 8696 ROUTE 353

City
CATTARAUGUSState
NYZip Code
14719FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.18

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.33900

Amount of Each Receipt this Period

25.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

108.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRITCHARD, JOHN, , ,

Mailing Address 8696 ROUTE 353

City
CATTARAUGUSState
NYZip Code
14719FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : SA11AI.33901

Amount of Each Receipt this Period

27.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RADUNS, BRYCE, R, ,

Mailing Address 6187 MANN ROAD

City
AKRONState
NYZip Code
14001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2016

Transaction ID : SA11AI.33892

Amount of Each Receipt this Period

18.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RADUNS, BRYCE, R, ,

Mailing Address 6187 MANN ROAD

City
AKRONState
NYZip Code
14001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

233.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2016

Transaction ID : SA11AI.33893

Amount of Each Receipt this Period

24.26

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

69.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RADUNS, BRYCE, R, ,

Mailing Address 6187 MANN ROAD

City
AKRON

State
NY

Zip Code
14001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.33894

Amount of Each Receipt this Period

27.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RADUNS, BRYCE, R, ,

Mailing Address 6187 MANN ROAD

City
AKRON

State
NY

Zip Code
14001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BABCOCK UTILITIES, INC.

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : SA11AI.33895

Amount of Each Receipt this Period

30.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STENZEL, BRUCE, , ,

Mailing Address 1098 UPPER MOUNTAIN RD

City
LEWISTON

State
NY

Zip Code
14092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MADER CONSTRUCTION CO INC

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

214.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : SA11AI.33773

Amount of Each Receipt this Period

44.18

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>A. STENZEL, BRUCE, , ,</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y 09 / 08 / 2016</p> <p>Transaction ID : SA11AI.33774</p>		
<p>Mailing Address 1098 UPPER MOUNTAIN RD</p>			<p>Amount of Each Receipt this Period</p> <p>29.48</p>		
<p>City</p> <p>LEWISTON</p>	<p>State</p> <p>NY</p>	<p>Zip Code</p> <p>14092</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p>Aggregate Year-to-Date ▼</p> <p>244.18</p>		
<p>Name of Employer (for Individual)</p> <p>MADER CONSTRUCTION CO INC</p>		<p>Occupation (for Individual)</p> <p>LABORER</p>			
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>					
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>B. STENZEL, BRUCE, , ,</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y 09 / 22 / 2016</p> <p>Transaction ID : SA11AI.33775</p>		
<p>Mailing Address 1098 UPPER MOUNTAIN RD</p>			<p>Amount of Each Receipt this Period</p> <p>45.15</p>		
<p>City</p> <p>LEWISTON</p>	<p>State</p> <p>NY</p>	<p>Zip Code</p> <p>14092</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p>Aggregate Year-to-Date ▼</p> <p>289.33</p>		
<p>Name of Employer (for Individual)</p> <p>MADER CONSTRUCTION CO INC</p>		<p>Occupation (for Individual)</p> <p>LABORER</p>			
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>					
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>C.</p>			<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y Y</p>		
<p>Mailing Address</p>			<p>Amount of Each Receipt this Period</p>		
<p>City</p>	<p>State</p>	<p>Zip Code</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee.</p> <p>C</p>			<p>Aggregate Year-to-Date ▼</p>		
<p>Name of Employer (for Individual)</p>		<p>Occupation (for Individual)</p>			
<p>Receipt For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>					
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>74.63</p>		
<p>TOTAL This Period (last page this line number only).....</p>			<p>1158.91</p>		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 26

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FSC SECURITIES CORPORATION

Mailing Address 2300 WINDY RIDGE PARKWAY
SUITE 1100

City
ATLANTA

State
GA

Zip Code
30339

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12017.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA17.34494

Amount of Each Receipt this Period

6045.24

☐ Memo Item

INVESTMENT APPRECIATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FSC SECURITIES CORPORATION

Mailing Address 2300 WINDY RIDGE PARKWAY
SUITE 1100

City
ATLANTA

State
GA

Zip Code
30339

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13177.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA17.34495

Amount of Each Receipt this Period

1159.58

☐ Memo Item

INTEREST/DIVIDENDS FROM INVESTMENTS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

7204.82

TOTAL This Period (last page this line number only).....▶

7204.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. BEATHANY MISSIONARY BAPTIST CHURCH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 1328 CALUMET AVE

City
NIAGARA FALLSState
NYZip Code
14305Purpose of Disbursement
DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34485

Amount of Each Disbursement this Period

240.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN CERETTO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2016

Mailing Address 4645 PERRY COURT

City
LEWISTONState
NYZip Code
14092Purpose of Disbursement
NYS ASSEMBLY CANDIDATE

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34477

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FSC SECURITIES CORPORATION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 2300 WINDY RIDGE PARKWAY
SUITE 1100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
INVESTMENT FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34496

Amount of Each Disbursement this Period

314.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1054.27

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. JAPAN-AMERICA SOCIETY OF RHODE ISLAND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2016

Mailing Address 28 PELHAM STREET

City
NEWPORTState
RIZip Code
02840Purpose of Disbursement
AD/SPONSORSHIP

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.34475

Amount of Each Disbursement this Period

1300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LIUNA PAC FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2016

Mailing Address 905 16TH STREET N.W.

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LIUNA BUILDING AMERICA PAC

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.34482

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NIAGARA FALLS REPORTER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2016

Mailing Address 1625 BUFFALO AVE.

City
NIAGARA FALLSState
NYZip Code
14304Purpose of Disbursement
PRINT ADVERTISEMENT

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.34483

Amount of Each Disbursement this Period

750.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

42050.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. NIAGARA FALLS REPORTER

Mailing Address 1625 BUFFALO AVE.

City
NIAGARA FALLSState
NYZip Code
14304Purpose of Disbursement
PRINT ADVERTISEMENT

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34491

Amount of Each Disbursement this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NIAGARA STREET AREA BUSINESS & PROFESSIONAL ASSOC

Mailing Address 481 16TH STREET

City
NIAGARA FALLSState
NYZip Code
14303Purpose of Disbursement
DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34479

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NOAH

Mailing Address 8701 BUFFALO AVENUE

City
NIAGARA FALLSState
NYZip Code
14304Purpose of Disbursement
DONATION TO BANQUET

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34487

Amount of Each Disbursement this Period

400.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2050.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. NOAH

Mailing Address 8701 BUFFALO AVENUE

City
NIAGARA FALLSState
NYZip Code
14304Purpose of Disbursement
BANQUET DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34492

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NOAH

Mailing Address 8701 BUFFALO AVENUE

City
NIAGARA FALLSState
NYZip Code
14304Purpose of Disbursement
BANQUET DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34493

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NYS POLITICAL ACTION COMMITTEE

Mailing Address 18 CORPORATE WOODS BOULEVARD

City
ALBANYState
NYZip Code
12211Purpose of Disbursement
PAC CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.34476

Amount of Each Disbursement this Period

267.47

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1217.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LABORERS INTERNATIONAL UNION OF NORTH AMERICA - LOCAL NO. 91 POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. NYS POLITICAL ACTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Mailing Address 18 CORPORATE WOODS BOULEVARD

City
ALBANYState
NYZip Code
12211Purpose of Disbursement
PAC CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34481

Amount of Each Disbursement this Period

370.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NYS POLITICAL ACTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2016

Mailing Address 18 CORPORATE WOODS BOULEVARD

City
ALBANYState
NYZip Code
12211Purpose of Disbursement
PAC CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34484

Amount of Each Disbursement this Period

326.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. YWCA NIAGARA FRONTIER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Mailing Address 32 COTTAGE STREET

City
LOCKPORTState
NYZip Code
14094Purpose of Disbursement
DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.34489

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1696.06

TOTAL This Period (last page this line number only).....▶

48067.80